

ISSUE SLIP STAPLE AREA (DETENTION ONLY)

PORTION	DETAILS	ID NO.	DATE
FEE DETERMINATION	N/A		03/21/01
O.P.E. CLASSIFIER			
FORMALITY REVIEW	H-5	943	5-22-1
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☐ Rejected      ☐ Disputed  
☐ Allowed      ☐ Interference  
☐ (Through omitted)      ☐ Claimed  
☐ Restricted      ☐ Adjusted

Claim	Date	Claim	Date	Claim	Date
1		1		1	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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